

Application or Docket Number

Effective December 8, 2004									10/5/19			
		CLAIMS A	S FILED - F		(Column 2)		SMALL ENTITY TYPE		TITY	OR	OTHER I	
U.S.	NATIONAL S	TAGE FEES					F	ATE	FEE		RATE	FEE
BASI	C FEE				-		BASI	FEE		OR	BASIC FEE	300
EXAMINATION FEE							EXAM	. FEE			EXAM. FEE	200
SEARCH FEE							SEAR	CH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minu	s 100 =		/ 50 =	X \$	125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			3/ min	us 20 =	*	11	X	\$ 25 =		OR	X \$ 50 =	550
INDEPENDENT CLAIMS			5 mi	nus 3 =	* 0	2	X \$	100 =		OR	X \$ 200 =	400
MULTIPLE DEPENDENT CLAIM PRE			SENT				+\$	180 =		OR	+ \$ 360 =	
* If	the difference	in column 1 is l	ess than zero,	enter "(O" in co	lumn 2	T	OTAL		OR	TOTAL	1850
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA	RATE		ADDI- TIONAL FEE	:	RATE	ADDĮ- TIONĄĻ FEE
	Total	*	Minus	**		=	X	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	X \$	100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				CLAIM		+ \$	180 =		OR	+ \$ 360 =	
								L ADDIT. FFF		OR	TOTAL ADDIT.	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=	X	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	X \$	100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		+ \$	180 =		OR	+ \$ 360 =	
TOTAL ADDIT. OR TOTAL ADD											TOTAL ADDIT.	
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. 												